| _            | •                | _    |
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| i Cot        | Available        |      |
| <b>155</b> 2 | <u>Available</u> | CODV |
|              |                  |      |

## PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000 09805051

Application or Docket Number

09825051

|   |  | CLAIMS AS                                 | S FILED -  |              | (Colu                        | mn 2)            |           | SMALL EN           |                        | OR             | OTHER<br>SMALL I    |                        |
|---|--|---|------------|--------------|------------------------------|------------------|-----------|--------------------|------------------------|----------------|---------------------|------------------------|
| TO  | TAL CLAIMS   |   | €,         | )            |                              |                  |           | RATE               | FEE                    |                | RATE                | FEE                    |
| FOR   |  | NUMBER FILED                              |            | NUMBER EXTRA |                              |                  | BASIC FEE | 355.00             | OR                     | BASIC FEE      | 710.00              |                        |
| TOTAL CHARGEABLE CLAIMS CO minus 20   |  | us 20=                                    | · 30       |              |                              | X\$ 9=           | 2:70      | OR                 | X\$18=                 |                |                     |                        |
| INDEPENDENT CLAIMS 2 minus 3 =  |  |   | · 25       |              |                              | X40=             | 0         | OR                 | X80=                   |                |                     |                        |
| MULTIPLE DEPENDENT CLAIM PRESENT  |  |   |            |              |                              |                  | +135=     | 0                  | OR                     | +270=          |                     |                        |
| * If the difference in column 1 is less than zero, enter "0" in                                     |  |   |            |              | r "0" in c                   | olumn 2          |           | TOTAL              | 1/25                   | OR             | TOTAL               |                        |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)  |  |   |            |              |                              | L                | SMALL     |                    | OR                     | OTHER<br>SMALL |                     |                        |
| AMENDMENT A   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |            | PREVE        | BER                          | PRESENT<br>EXTRA |           | RATE               | ADDI-<br>TIONAL<br>FEE | /              | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total  | .52                                       | Minus      | 5            | 2                            | =0               |           | X\$ 9=             |                        | OR             | X\$18=              |                        |
|   | Independent  | .3  | Minus      | \            | 3                            | <u>-0</u>        |           | X40=               |                        | OR             | X80=                |                        |
|   | FIRST PRESE  | NTATION OF M                              | ULTIPLE DE | PENDEN       | CLAIM                        |                  | j         | +135=              |                        | <b>Q</b> R     | +270=               |                        |
|   |  |   |            |              |                              |                  |           | TOTAL<br>ADDIT/FEE |                        | OA             | TOTAL<br>ADDIT, FEE |                        |
|   |  | (Column 1)                                |            | (Colu        | mn 2)                        | (Column 3        |           | AUDITYPEE          |                        |                | 70011.1 EE          |                        |
| ENT B   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |            | NUN<br>PREVI | HEST<br>MBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA |           | RATE               | ADDI-<br>TIONAL<br>FEE |                | RATE                | ADDI-<br>TIONAL<br>FEE |
| AMENDMENT   | Total  | •   | Minus      | **           |                              | =                |           | X\$ 9=             |                        | OR             | X\$18=              |                        |
| ME  | Independent  | •   | Minus      | ***          |                              | =                |           | X40=               |                        | OR             | X80=                |                        |
|   | FIRST PRESE  | NTATION OF M                              | ULTIPLE DE | PENDEN       | T CLAIM                      |                  | J         | +135=              |                        |                | +270=               |                        |
|   |  |   |            |              |                              |                  |           | TOTAL              |                        | OR             | TOTAL               |                        |
|   |  | . X                                       |            |              |                              |                  |           | ADDIT. FEE         |                        | OR             | ADDIT. FEE          |                        |
|   |  | (Column 1)<br>CLAIMS                      |            |              | mn 2)<br>HEST                | (Column 3        | 4         |                    |                        |                |                     |                        |
| AMENDMENT C   |  | REMAINING<br>AFTER<br>AMENDMENT           | ,          | NUA<br>PREVI | MBER<br>OUSLY<br>FOR         | PRESENT<br>EXTRA |           | RATE               | ADDI-<br>TIONAL<br>FEE |                | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total  | •   | Minus      |              |                              | = .              |           | X\$ 9=             |                        | OR             | X\$18≟              |                        |
| ME  | Independent  | •   | Minus      |              |                              | =                |           | X40=               |                        | OR             | X80=                |                        |
| Ľ   | FIRST PRESE  | NTATION OF M                              | ULTIPLE DE | PENDEN       | T CLAIM                      |                  | J         |                    |                        | l              | 070                 |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.               |  |   |            |              |                              |                  | +135=     |                    | OR                     | +270=          |                     |                        |
| " If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT, FEE |  |   |            |              |                              |                  |           | ADDIT. FEE         |                        |                |                     |                        |
|   | ""If the "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |            |              |                              |                  |           |                    |                        |                |                     |                        |